

Fill in this information to identify your case:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NEW YORK</u>			
Case number (if known)	8:25-bk-70092		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 370,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 23,487.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 393,487.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 892,192.51
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 65,178.00
		Your total liabilities \$ 957,370.51

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 5,397.64
5.	Schedule J: Your Expenses (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 5,806.00

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 3,440.40

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:

	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00

9g. **Total.** Add lines 9a through 9f.

\$ 0.00

Fill in this information to identify your case and this filing:

Debtor 1	RUTH ELIZABETH LITUMA VELIN	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
Case number	8:25-bk-70092	

Check if this is an
amended filing

Official Form 106A/B

Schedule A/B: Property

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In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

1.1

130 butler blvd

Street address, if available, or other description

ELMONT NY 11003

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the
entire property?

\$740,000.00

Current value of the
portion you own?

\$370,000.00

Describe the nature of your ownership interest
(such as fee simple, tenancy by the entireties, or
a life estate), if known.

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local
property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$370,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1 Make: Infinity
 Model: Qx80
 Year: 2017
 Approximate mileage: 80000
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$19,451.00 Current value of the portion you own? \$19,451.00

3.2 Make: Nissan
 Model: Sentra
 Year: 2014
 Approximate mileage: 170000
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$3,668.00 Current value of the portion you own? \$3,668.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$23,119.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware
 No
 Yes. Describe.....

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games
 No
 Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles
 No
 Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments
 No
 Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment
 No
 Yes. Describe.....

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No
 Yes. Describe.....

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No
 Yes. Describe.....

13. Non-farm animals*Examples:* Dogs, cats, birds, horses

No
 Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

No
 Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$0.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No
 Yes.....

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No
 Yes..... Institution name:

17.1. Checking	Jovia	\$200.00
17.2. Checking	Teachers	\$90.00
17.3. Savings	Jovia	\$5.00
17.4. Savings	Teachers	\$5.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No
 Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No
 Yes. Give specific information about them.....

Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

No
 Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.Type of account:
401(k)Institution name:
401k

\$68.00

22. Security deposits and prepayments*Examples:* Your share of all unused deposits you have made so that you may continue service or use from a company*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes. Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information..**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$368.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2	\$370,000.00
56. Part 2: Total vehicles, line 5	\$23,119.00
57. Part 3: Total personal and household items, line 15	\$0.00
58. Part 4: Total financial assets, line 36	\$368.00
59. Part 5: Total business-related property, line 45	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	\$0.00
62. Total personal property. Add lines 56 through 61...	\$23,487.00
	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$393,487.00

Fill in this information to identify your case:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NEW YORK</u>			
Case number (if known)	<u>8:25-bk-70092</u>		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
130 butler blvd, ELMONT, NY 11003 Line from <i>Schedule A/B</i> : 1.1	\$370,000.00	<input checked="" type="checkbox"/> \$152,513.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5206
2017 Infinity Qx80 80000 miles Line from <i>Schedule A/B</i> : 3.1	\$19,451.00	<input checked="" type="checkbox"/> \$8,594.49 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(8)
2014 Nissan Sentra 170000 miles Line from <i>Schedule A/B</i> : 3.2	\$3,668.00	<input checked="" type="checkbox"/> \$11,716.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(8)
Jovia Line from <i>Schedule A/B</i> : 17.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)
Teachers Line from <i>Schedule A/B</i> : 17.2	\$90.00	<input checked="" type="checkbox"/> \$90.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)

Debtor 1	<u>RUTH ELIZABETH LITUMA VELIN</u>		Case number (if known)	<u>8:25-bk-70092</u>
Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
Jovia Line from <i>Schedule A/B</i> : 17.3		<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)
Teachers Line from <i>Schedule A/B</i> : 17.4		<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)
401k Line from <i>Schedule A/B</i> : 21.1		<u>\$68.00</u>	<input checked="" type="checkbox"/> <u>\$68.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Fill in this information to identify your case:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NEW YORK</u>			
Case number (if known)	<u>8:25-bk-70092</u>		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1	Freedom Mortgage Corporation	Unknown	\$0.00	\$0.00

Creditor's Name

11988 Exit 5 Pkwy
Bldg

Fishers, IN 46037-7939

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 2019-10-26Last 4 digits of account number 2258

2.2	Freedom Mortgage Corporation	Describe the property that secures the claim:	Unknown	\$0.00	\$0.00
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Creditor's Name

11988 Exit 5 Pkwy
Bldg

Fishers, IN 46037-7939

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 2018-03-27Last 4 digits of account number 9128

Debtor 1 <u>RUTH ELIZABETH LITUMA VELIN</u>	Case number (if known)	<u>8:25-bk-70092</u>			
First Name	Middle Name	Last Name			
<u>2.3 Rocket mortgage</u>		Describe the property that secures the claim:	<u>\$434,973.00</u>	<u>\$740,000.00</u>	<u>\$0.00</u>
Creditor's Name		<u>130 butler blvd, ELMONT, NY 11003</u>			
<p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p>					
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>					
<u>Date debt was incurred</u> <u>03/16/2018</u>		<u>Last 4 digits of account number</u> <u>8396</u>			
<u>2.4 Rocket Mortgage</u>		Describe the property that secures the claim:	<u>\$435,823.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
Creditor's Name					
<p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p>					
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>					
<u>Date debt was incurred</u> <u>2019-10</u>		<u>Last 4 digits of account number</u> <u>8396</u>			
<u>2.5 Santander</u>		Describe the property that secures the claim:	<u>\$10,856.51</u>	<u>\$19,451.00</u>	<u>\$0.00</u>
Creditor's Name		<u>2017 Infinity Qx80 80000 miles</u>			
<p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p>					
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>					
<u>Date debt was incurred</u> <u>02/28/2022</u>		<u>Last 4 digits of account number</u> <u>5765</u>			

Debtor 1	<u>RUTH ELIZABETH LITUMA VELIN</u>		Case number (if known)	<u>8:25-bk-70092</u>
	First Name	Middle Name	Last Name	
2.6	Santander Consumer USA, Inc			
Creditor's Name		Describe the property that secures the claim:		\$10,540.00
PO Box 961211 Fort Worth, TX 76161-0211				\$0.00
Number, Street, City, State & Zip Code				\$0.00
Who owes the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
Date debt was incurred		<u>2021-02</u>		
Last 4 digits of account number		<u>1000</u>		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$892,192.51

If this is the last page of your form, add the dollar value totals from all pages.

\$892,192.51

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[]	Name, Number, Street, City, State & Zip Code Freedom Mortgage Corporation Attn: Bankruptcy 907 Pleasant Valley Ave Ste 3 Mount Laurel, NJ 08054-1210	On which line in Part 1 did you enter the creditor?	<u>2.1</u>
[]	Name, Number, Street, City, State & Zip Code Freedom Mortgage Corporation Attn: Bankruptcy 907 Pleasant Valley Ave Ste 3 Mount Laurel, NJ 08054-1210	On which line in Part 1 did you enter the creditor?	<u>2.2</u>
[]	Name, Number, Street, City, State & Zip Code Rocket Mortgage Attn: Bankruptcy 1050 Woodward Ave Detroit, MI 48226-3573	On which line in Part 1 did you enter the creditor?	<u>2.4</u>
[]	Name, Number, Street, City, State & Zip Code Santander Consumer USA, Inc Attn: Bankruptcy PO Box 961245 Fort Worth, TX 76161-0244	On which line in Part 1 did you enter the creditor?	<u>2.6</u>

Fill in this information to identify your case:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NEW YORK</u>			
Case number (if known)	8:25-bk-70092		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	Affirm, Inc. Nonpriority Creditor's Name 650 California St FI 12 San Francisco, CA 94108-2716 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8BZQ</u> <u>\$651.00</u>
	When was the debt incurred? <u>2022-11</u>	
	As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

4.2	Affirm, Inc. Nonpriority Creditor's Name 650 California St Fl 12 San Francisco, CA 94108-2716	Last 4 digits of account number	<u>R9ZA</u>	\$156.00
		When was the debt incurred?	<u>2021-12</u>	
	As of the date you file, the claim is: Check all that apply			
	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.3	Affirm, Inc. Nonpriority Creditor's Name 650 California St Fl 12 San Francisco, CA 94108-2716	Last 4 digits of account number	<u>Z8B4</u>	\$97.00
		When was the debt incurred?	<u>2023-08</u>	
	As of the date you file, the claim is: Check all that apply			
	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.4	Affirm, Inc. Nonpriority Creditor's Name 650 California St Fl 12 San Francisco, CA 94108-2716	Last 4 digits of account number	<u>3JWE</u>	\$54.00
		When was the debt incurred?	<u>2023-08</u>	
	As of the date you file, the claim is: Check all that apply			
	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

4.5	Amex	Last 4 digits of account number	5678	\$4,993.00
	Nonpriority Creditor's Name PO Box 6789 Sioux Falls, SD 57117-6789	When was the debt incurred?	2021-10	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.6	Bank of America	Last 4 digits of account number	5506	\$7,453.00
	Nonpriority Creditor's Name PO Box 982238 El Paso, TX 79998-2238	When was the debt incurred?	2016-05	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.7	Bank of America	Last 4 digits of account number	5811	\$5,518.00
	Nonpriority Creditor's Name PO Box 982238 El Paso, TX 79998-2238	When was the debt incurred?	2014-10	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.8	Bank of America	Last 4 digits of account number	4098	\$0.00
	Nonpriority Creditor's Name PO Box 45144 Jacksonville, FL 32232-5144	When was the debt incurred?	2024-04	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

4.9

Bank of America

Nonpriority Creditor's Name

PO Box 45144

Jacksonville, FL 32232-5144

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

6466\$0.00

When was the debt incurred?

2022-12**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
0Citi Card/Best Buy

Nonpriority Creditor's Name

PO Box 6497

Sioux Falls, SD 57117-6497

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

3703\$4,422.00

When was the debt incurred?

2021-08**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
1Citibank/the Home Depot

Nonpriority Creditor's Name

PO Box 6497

Sioux Falls, SD 57117-6497

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

2481\$5,180.00

When was the debt incurred?

2018-07**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

<div style="border: 1px solid black; padding: 2px; display: inline-block;">4.1 2</div> Comenity Bank/Victoria Secret Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218-2789	Last 4 digits of account number <u>7100</u> \$218.00 When was the debt incurred? <u>2021-05</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
4.1 3 Faculty Practice Group EL Nonpriority Creditor's Name 7901 Broadway, Room A1-9, Elmhurst Elmhurst, NY 11373	
Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>9751</u> \$3,502.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	
4.1 4 Long Island Integrative Healt Nonpriority Creditor's Name Local 272 Welfare Foun, 220 East 23rd Street, Room 805 New York, NY 10010	
Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number <u>8414</u> \$4,200.00 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-700924.1
5Long Island Integrative Health

Nonpriority Creditor's Name

Local 272 Welfare Fund, 220 East
23rd Street, Room 805
New York, NY 10010

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

8414\$2,545.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
6Macy's/ DSNB

Nonpriority Creditor's Name

PO Box 6789
Sioux Falls, SD 57117-6789

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

2147\$4,713.00

When was the debt incurred?

2016-11**As of the date you file, the claim is:** Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.1
7NYC Health + Hospitals

Nonpriority Creditor's Name

50 Water St.
New York, NY 10004

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0426\$50.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

<div style="border: 1px solid black; padding: 2px; display: inline-block;">4.1 8</div> <p><u>Santander Bank NA</u> Nonpriority Creditor's Name PO Box 12646 Reading, PA 19612-2646</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5080</u> \$16,819.00</p> <p>When was the debt incurred? <u>2022-03</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____</p>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">4.1 9</div> <p><u>Td Bank/Raymour & Flanigan</u> Nonpriority Creditor's Name</p> <p>Columbia, SC 29202</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>7951</u> \$1,153.00</p> <p>When was the debt incurred? <u>2023-03</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____</p>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">4.2 0</div> <p><u>Wells Fargo Bank NA</u> Nonpriority Creditor's Name PO Box 393 Minneapolis, MN 55480-0393</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>5616</u> \$1,387.00</p> <p>When was the debt incurred? <u>2019-03</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____</p>	

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

<p>4.2 1</p> <p>Wells Fargo Jewelry Advantage</p> <p>Nonpriority Creditor's Name PO Box 393 Minneapolis, MN 55480-0393</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5751</u> <u>\$2,067.00</u></p> <p>When was the debt incurred? <u>2019-11</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u> </u></p>
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Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address
Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Name and Address
Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Non-priority Unsecured Claims

Name and Address
Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims

Name and Address
Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims

Name and Address
Amex
Correspondence/Bankruptcy
PO Box 981540
El Paso, TX 79998-1540

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4, 5, or (Check one): Part 1: Creditors with Priority Unsecured Claims

Name and Address
Bank of America
Attn: Bankruptcy
4909 Savarese Cir
Tampa, FL 33634-2413

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

Name and Address
 Bank of America
 Attn: Bankruptcy
 4909 Savarese Cir
 Tampa, FL 33634-2413

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Bank of America
 Attn: Bankruptcy NC4-105-03-14
 PO Box 26012
 Greensboro, NC 27420-6012

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Bank of America
 Attn: Bankruptcy NC4-105-03-14
 PO Box 26012
 Greensboro, NC 27420-6012

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Citi Card/Best Buy
 Attn: Citicorp Cr Svrs Centralized
 Bankruptcy
 PO Box 790040
 Saint Louis, MO 63179-0040

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Citibank/the Home Depot
 Citicorp Cr Svrs/Centralized
 Bankruptcy
 PO Box 790040
 Saint Louis, MO 63179-0040

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Comenity Bank/Victoria Secret
 Attn: Bankruptcy
 PO Box 182125
 Columbus, OH 43218-2125

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Macy's/ DSNB
 Attn: Bankruptcy
 701 E 60th St N
 Sioux Falls, SD 57104-0432

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Td Bank/Raymour & Flanigan
 Attn: Bankruptcy
 1701 Marlton Pike E
 Cherry Hill, NJ 08003-2390

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Wells Fargo Bank NA
 Attn: Bankruptcy
 1 Home Campus
 # MAC X2303-01A FL 3
 Des Moines, IA 50328-0001

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
 Wells Fargo Jewelry Advantage
 Attn: Bankruptcy

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line 4.21 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092PO Box 10438
Des Moines, IA 50306-0438

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

	Total Claim
6a. Domestic support obligations	\$ 0.00
6b. Taxes and certain other debts you owe the government	\$ 0.00
6c. Claims for death or personal injury while you were intoxicated	\$ 0.00
6d. Other. Add all other priority unsecured claims. Write that amount here.	\$ 0.00

6e. Total Priority. Add lines 6a through 6d.

6e.	\$ 0.00
-----	---------

Total claims from Part 2

	Total Claim
6f. Student loans	\$ 0.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ 0.00
6h. Debts to pension or profit-sharing plans, and other similar debts	\$ 0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	\$ 65,178.00
6j. Total Nonpriority. Add lines 6f through 6i.	\$ 65,178.00

Fill in this information to identify your case:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK			
Case number (if known)	8:25-bk-70092		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

creditors have claims secured by your property, or
 you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Rocket mortgage	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: 130 butler blvd, ELMONT, NY 11003		
Creditor's name: Santander	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: 2017 Infinity Qx80 80000 miles		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name:

No

Description of leased Property:

Yes

Fill in this information to identify your case:

Debtor 1 RUTH ELIZABETH LITUMA VELINDebtor 2
(Spouse, if filing)United States Bankruptcy Court for the: Eastern District of New YorkCase number 8:25-bk-70092
(if known)

Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse

2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

 Check if this is an amended filing**Official Form 122A - 1****Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income**1. What is your marital and filing status? Check one only.**

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 3,440.40	\$ 0.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ 0.00
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

8. **Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ 0.00
 For your spouse..... \$ 0.00

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse\$ 0.00 \$ 0.009. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.\$ 0.00 \$ 0.0010. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below..

_____ \$ 0.00 \$ 0.00
 _____ \$ 0.00 \$ 0.00

Total amounts from separate pages, if any.

+ \$ 0.00 \$ 0.0011. **Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 3,440.40 + \$ 0.00 = \$ 3,440.40

Total current monthly income

Part 2: Determine Whether the Means Test Applies to You12. **Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11.....**Copy line 11 here=>**\$ 3,440.40

Multiply by 12 (the number of months in a year)

x 12

12b. The result is your annual income for this part of the form

12b. \$ 41,284.8013. **Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

NY

Fill in the number of people in your household.

8

Fill in the median family income for your state and size of household.

13. \$ 170,191.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. **How do the lines compare?**14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
Go to Part 3. Do NOT fill out or file Official Form 122A-2.14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*
Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

XRUTH ELIZABETH LITUMA VELIN
Signature of Debtor 1

Date _____

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092**Current Monthly Income Details for the Debtor****Debtor Income Details:**

Income for the Period 07/01/2024 to 12/31/2024.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Amor Homecare INC

Constant income of \$3,440.40 per month.*

***Paycheck Details:**

Amor Homecare INC

Date	Earnings	Overtime	Taxes	Other	Net Check
8/30/2024	752.00	0.00	156.80	25.96	569.24
8/23/2024	752.00	0.00	156.80	25.96	569.24
8/16/2024	752.00	0.00	156.80	25.96	569.24
8/9/2024	752.00	0.00	160.30	3.40	588.30
8/2/2024	752.00	0.00	160.30	3.40	588.30
7/26/2024	752.00	0.00	160.30	3.40	588.30
7/19/2024	780.20	79.90	185.34	3.81	670.95
7/12/2024	752.00	0.00	160.30	2.80	588.90
7/5/2024	752.00	0.00	160.30	3.40	588.30
9/6/2024	752.00	0.00	156.80	25.36	569.84
9/13/2024	752.00	0.00	156.80	25.96	569.24
9/20/2024	829.55	0.00	174.40	28.58	626.57
9/27/2024	752.00	0.00	156.80	25.96	569.24
10/18/2024	752.00	0.00	156.80	25.96	569.24
10/25/2024	752.00	0.00	156.80	25.36	569.84
11/1/2024	752.00	0.00	156.80	25.36	569.84
12/6/2024	752.00	0.00	156.80	25.36	569.84
12/7/2024	752.00	0.00	156.80	25.36	569.84
9/20/2024	829.55	0.00	174.40	28.58	626.57
10/4/2024	752.00	0.00	156.80	25.36	569.84
10/11/2024	752.00	0.00	156.80	25.96	569.24
11/8/2024	752.00	0.00	156.80	25.36	569.84
11/15/2024	752.00	0.00	156.80	25.36	569.84
11/22/2024	752.00	0.00	156.80	25.36	569.84
11/29/2024	752.00	0.00	156.80	25.36	569.84
12/13/2024	827.20	0.00	173.86	27.91	625.43
12/20/2024	752.00	0.00	156.80	25.36	569.84
Totals:	20,562.50	79.90	4,331.90	565.96	15,744.54

**United States Bankruptcy Court
Eastern District of New York**

In re RUTH ELIZABETH LITUMA VELIN

Debtor(s)

Case No. 8:25-bk-70092

Chapter 7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: _____

RUTH ELIZABETH LITUMA VELIN

Signature of Debtor

Date: _____

Signature of Attorney
Roberto Pagan-Lopez 4978391
Pagan Lopez Law
28-07 Jackson Ave.
Tower Three Jackson, 5th Floor
Long Island City, NY 11101
(646) 216-8881 Fax: (646) 490-2159

Affirm, Inc.
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

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Fl 12
San Francisco, CA 94108-2716

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650 California St
Fl 12
San Francisco, CA 94108-2716

Amex
PO Box 6789
Sioux Falls, SD 57117-6789

Amex
Correspondence/Bankruptcy
PO Box 981540
El Paso, TX 79998-1540

Bank of America
PO Box 982238
El Paso, TX 79998-2238

Bank of America
PO Box 45144
Jacksonville, FL 32232-5144

Bank of America
Attn: Bankruptcy
4909 Savarese Cir
Tampa, FL 33634-2413

Bank of America
Attn: Bankruptcy NC4-105-03-14
PO Box 26012
Greensboro, NC 27420-6012

Bank of America
PO Box 982238
El Paso, TX 79998-2238

Bank of America
PO Box 45144
Jacksonville, FL 32232-5144

Bank of America
Attn: Bankruptcy
4909 Savarese Cir
Tampa, FL 33634-2413

Bank of America
Attn: Bankruptcy NC4-105-03-14
PO Box 26012
Greensboro, NC 27420-6012

Citi Card/Best Buy
PO Box 6497
Sioux Falls, SD 57117-6497

Citi Card/Best Buy
Attn: Citicorp Cr Svcs Centralized Bankr
PO Box 790040
Saint Louis, MO 63179-0040

Citibank/the Home Depot
PO Box 6497
Sioux Falls, SD 57117-6497

Citibank/the Home Depot
Citicorp Cr Svcs/Centralized Bankruptcy
PO Box 790040
Saint Louis, MO 63179-0040

Comenity Bank/Victoria Secret
PO Box 182789
Columbus, OH 43218-2789

Comenity Bank/Victoria Secret
Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218-2125

Faculty Practice Group EL
7901 Broadway, Room A1-9, Elmhurst
Elmhurst, NY 11373

Freedom Mortgage Corporation
11988 Exit 5 Pkwy
Bldg
Fishers, IN 46037-7939

Freedom Mortgage Corporation
Attn: Bankruptcy
907 Pleasant Valley Ave
Ste 3
Mount Laurel, NJ 08054-1210

Freedom Mortgage Corporation
11988 Exit 5 Pkwy
Bldg
Fishers, IN 46037-7939

Freedom Mortgage Corporation
Attn: Bankruptcy
907 Pleasant Valley Ave
Ste 3
Mount Laurel, NJ 08054-1210

Long Island Integrative Health
Local 272 Welfare Fund, 220 East 23rd St
New York, NY 10010

Long Island Integrative Health
Local 272 Welfare Fund, 220 East 23rd St
New York, NY 10010

Macy's/ DSNB
PO Box 6789
Sioux Falls, SD 57117-6789

Macy's/ DSNB
Attn: Bankruptcy
701 E 60th St N
Sioux Falls, SD 57104-0432

Ney ordonez

NYC Health + Hospitals
50 Water St.
New York, NY 10004

Rocket mortgage
1050 Woodward ave
Detroit, MI 48226

Rocket Mortgage
1050 Woodward Ave
Detroit, MI 48226-3573

Rocket Mortgage
Attn: Bankruptcy
1050 Woodward Ave
Detroit, MI 48226-3573

Santander
Po box 660633
Dallas, TX 75266

Santander Bank NA
PO Box 12646
Reading, PA 19612-2646

Santander Consumer USA, Inc
PO Box 961211
Fort Worth, TX 76161-0211

Santander Consumer USA, Inc
Attn: Bankruptcy
PO Box 961245
Fort Worth, TX 76161-0244

Td Bank/Raymour & Flanigan
Columbia, SC 29202

Td Bank/Raymour & Flanigan
Attn: Bankruptcy
1701 Marlton Pike E
Cherry Hill, NJ 08003-2390

Wells Fargo Bank NA
PO Box 393
Minneapolis, MN 55480-0393

Wells Fargo Bank NA
Attn: Bankruptcy
1 Home Campus
MAC X2303-01A FL 3
Des Moines, IA 50328-0001

Wells Fargo Jewelry Advantage
PO Box 393
Minneapolis, MN 55480-0393

Wells Fargo Jewelry Advantage
Attn: Bankruptcy
PO Box 10438
Des Moines, IA 50306-0438

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

IN RE: RUTH ELIZABETH LITUMA VELIN

Chapter 7

Case No.: 8:25-bk-70092

Debtor(s)

STATEMENT PURSUANT TO LOCAL RULE 2017

I, Roberto Pagan-Lopez 4978391 , an attorney admitted to practice in this Court, state:

1. That I am the attorney for the above-named debtor(s) and am fully familiar with the facts herein.
2. That prior to the filing of the petition herein, my firm rendered the following services to the above-named debtor(s):

Date\Time	Services
11/08/2024 - 1 hour	Initial interview, analysis of financial condition, etc.
11/25/2024 - 1 hour	
12/10/2024 - 30	
min12/19/2024 - 20	
min12/30/2024 - 25	Preparation and review of
min01/10/2024 - 1 hour	Bankruptcy petition

3. That my firm will also represent the debtor(s) at the first meeting of creditors.
4. That all services rendered prior to the filing of the petition herein were rendered by my firm.
5. That my usual rate of compensation of bankruptcy matters of this type is \$ 3,000.00 .

Dated:

Roberto Pagan-Lopez 4978391
Attorney for debtor(s)
 Pagan Lopez Law
 28-07 Jackson Ave.
 Tower Three Jackson, 5th Floor

Long Island City, NY 11101
 (646) 216-8881 Fax:(646) 490-2159
 rpagan@paganlopezlaw.com